

<b>COMBINED</b>		Attorney Docket Number <b>9-13528-144US</b>
<b>DECLARATION FOR UTILITY OR DESIGN</b>		First Named Inventor <b>Christopher THOMPSON</b>
<b>PATENT APPLICATION (37 CFR 1.63)</b>		<i>Complete if known</i>
<b>AND POWER OF ATTORNEY</b>		Application Number _____
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing	OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)) required)	Filing Date _____
		Group Art Unit _____
		Examiner Name _____

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**METHOD AND SYSTEM FOR INITIATING COMMUNICATIONS WITH DISPERSED TEAM MEMBERS FROM WITHIN A VIRTUAL TEAM ENVIRONMENT USING PERSONAL IDENTIFIERS**

the specification of which

☒ is attached hereto.

OR

☐ was filed on \_\_\_\_\_ (mm/dd/yyyy)

as United States Application Number or PCT International Application Number \_\_\_\_\_

and was amended on \_\_\_\_\_ (mm/dd/yyyy) (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

COMBINED DECLARATION FOR UTILITY OR DESIGN  
PATENT APPLICATION (37 CFR 1.63) AND POWER OF ATTORNEY

I hereby claim the benefit of 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent Trademark Office connected therewith:

☒ Customer Number: **020988**  
**SWABEY OGILVY RENAULT**



**020988**  
or Bar Code Label  
PATENT AND TRADEMARK OFFICE

Direct all correspondence to:



**020988**

PATENT AND TRADEMARK OFFICE

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**Name of sole or First Inventor:**

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Christopher

THOMPSON

Inventor's Signature

*Chris Thompson*

Date

*Dec 15, 2000*

Residence: City

Manotick

State

Ontario

Country

Canada

Citizenship

Canadian

Post Office Address

5610 Goddard Street

City

Manotick

Province  
or State

Ontario

Postal Code  
Or Zip

K4M 1C5

Country

Canada

☒ Additional inventors are being named on the 3 supplemental Additional Inventor(s) PTO/SB/02A attached hereto.

**DECLARATION**

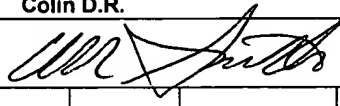
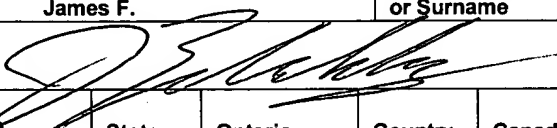

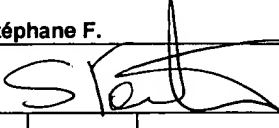
**ADDITIONAL INVENTOR(S)**  
**Supplemental Sheet**  
 Pag 1 of 3

<b>Name of Additional Joint Inventor, if any:</b>					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name <b>Brian F.</b>					Family Name or Surname <b>BEATON</b>				
Inventor's Signature					Date <b>2000-12-15</b>				
Residence: City <b>Ottawa</b>		State <b>Ontario</b>	Country <b>Canada</b>	Citizenship <b>Canadian</b>					
Mailing Address <b>65 Spencer Street</b>									
Mailing Address									
City <b>Ottawa</b>	Province or State <b>Ontario</b>	Postal Code Or Zip <b>K1Y 4W8</b>	Country <b>Canada</b>						
<b>Name of Additional Joint Inventor, if any:</b>					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name <b>Clifford P.</b>					Family Name or Surname <b>GROSSNER</b>				
Inventor's Signature					Date <b>2000/12/15</b>				
Residence: City <b>Nepean</b>		State <b>Ontario</b>	Country <b>Canada</b>	Citizenship <b>Canadian</b>					
Mailing Address <b>11 Stonehedge Park</b>									
Mailing Address									
City <b>Nepean</b>	Province or State <b>Ontario</b>	Postal Code Or Zip <b>K2H 8Z3</b>	Country <b>Canada</b>						
<b>Name of Additional Joint Inventor, if any:</b>					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name <b>Douglas E.</b>					Family Name or Surname <b>LIVERSIDGE</b>				
Inventor's Signature					Date <b>2000-12-15</b>				
Residence: City <b>Kanata</b>		State <b>Ontario</b>	Country <b>Canada</b>	Citizenship <b>Canadian</b>					
Mailing Address <b>144 Knudson Drive</b>									
Mailing Address									
City <b>Kanata</b>	Province or State <b>Ontario</b>	Postal Code Or Zip <b>K2K 2L8</b>	Country <b>Canada</b>						
<b>Name of Additional Joint Inventor, if any:</b>					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name <b>Roman</b>					Family Name or Surname <b>ROMANIUK</b>				
Inventor's Signature					Date <b>Dec 15/00</b>				
Residence: City <b>Ottawa</b>		State <b>Ontario</b>	Country <b>Canada</b>	Citizenship <b>Canadian</b>					
Mailing Address <b>120 Aylmer Avenue</b>									
Mailing Address									
City <b>Ottawa</b>	Province or State <b>Ontario</b>	Postal Code Or Zip <b>K1S 2X9</b>	Country <b>Canada</b>						

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

**DECLARATION**

**ADDITIONAL INVENTOR(S)**  
**Supplemental Sheet**  
**Page 2 of 3**

<b>Name of Additional Joint Inventor, if any:</b>					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name Colin D.R.					Family Name or Surname SMITH				
Inventor's Signature 					Date 2000/12/15				
Residence: City Ottawa		State Ontario		Country Canada		Citizenship Canadian			
Mailing Address 525 Mansfield Avenue									
Mailing Address									
City Ottawa		Province or State Ontario		Postal Code Or Zip K2A 2S8		Country Canada			
<b>Name of Additional Joint Inventor, if any:</b>					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name James F.					Family Name or Surname ZDRALEK				
Inventor's Signature 					Date 2000-12-15				
Residence: City Ottawa		State Ontario		Country Canada		Citizenship Canadian			
Mailing Address Suite 1509									
Mailing Address 475 Elgin Street									
City Ottawa		Province or State Ontario		Postal Code Or Zip K2P 2E6		Country Canada			
<b>Name of Additional Joint Inventor, if any:</b>					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name Jean J.					Family Name or Surname BOUCHARD				
Inventor's Signature 					Date 2000-12-12				
Residence: City Sillery		State Quebec		Country Canada		Citizenship Canadian			
Mailing Address 1280 Rue Oak									
Mailing Address									
City Sillery		Province or State Quebec		Postal Code Or Zip G1T 1Z6		Country Canada			
<b>Name of Additional Joint Inventor, if any:</b>					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name Stéphane F.					Family Name or Surname FORTIER				
Inventor's Signature 					Date 2000/12/12				
Residence: City Breakeyville		State Quebec		Country Canada		Citizenship Canadian			
Mailing Address 3 Rue de la Pêche									
Mailing Address									
City Breakeyville		Province or State Quebec		Postal Code Or Zip G0S 1E3		Country Canada			

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

**DECLARATION****ADDITIONAL INVENTOR(S)**

Supplemental Sheet

Page 3 of 3

<b>Name of Additional Joint Inventor, if any:</b>					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name L. Lloyd					Family Name or Surname WILLIAMS				
Inventor's Signature 					Date 15 Dec 2000				
Residence: City Kanata			State Ontario	Country Canada	Citizenship Canadian				
Mailing Address 15 Brodeur Crescent									
Mailing Address									
City Kanata	Province or State Ontario		Postal Code Or Zip K2L 1Z2		Country Canada				
<b>Name of Additional Joint Inventor, if any:</b>					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name					Family Name or Surname				
Inventor's Signature					Date				
Residence: City			State	Country	Citizenship				
Mailing Address									
Mailing Address									
City	Province or State		Postal Code Or Zip		Country				
<b>Name of Additional Joint Inventor, if any:</b>					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name					Family Name or Surname				
Inventor's Signature					Date				
Residence: City			State	Country	Citizenship				
Mailing Address									
Mailing Address									
City	Province or State		Postal Code Or Zip		Country				
<b>Name of Additional Joint Inventor, if any:</b>					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name					Family Name or Surname				
Inventor's Signature					Date				
Residence: City			State	Country	Citizenship				
Mailing Address									
Mailing Address									
City	Province or State		Postal Code Or Zip		Country				

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.